

# Health services delivery who is responsible?

by KARL VON HOLDT

**Service delivery at public hospitals is at an all-time low. But the responsibility lies with government, not workers.**

In his budget speech to Parliament this year, the Minister of Finance, Trevor Manuel, came out with fierce criticism of public services workers, blaming poor service delivery on their lack of commitment. "Those who don't want to work should leave the public service", he threatened. This is easy criticism and it may win the government some public support – but is it fair? Does it offer any direction in dealing with the challenge of poor service delivery?

For the past two years NALEDI has been working with public sector trade unions and management at a big public hospital to improve its functioning. Our experience suggests the minister is barking up the wrong tree.

When we started investigating conditions at the hospital we found very low staff morale, from the cleaners to the CEO. There are two key reasons for this situation: a very low level of managerial capacity and a shortage of staff. Neither of these factors is caused by workers' behaviour. They are the direct result of government action and inaction.

Government's macro-economic policy has translated into inadequate funding for the public services. More specifically, restructuring in the health sector has meant diverting resources from the big

tertiary hospitals to primary health care and clinics, as well as to underfunded and more rural provinces. This appears to be a progressive policy, but it threatens to destroy an already existing institutional capacity which serves the poorer communities in our country.

## Work pressure

In the hospital where NALEDI is working, these financial constraints translate into a shortage of staff. There is a 20%-30% shortage of nursing staff. The number of cleaners has been reduced by about 30% over the past eight years. This places an enormous pressure on existing staff, as a nursing auxiliary explained:

**“Restructuring threatens to destroy an already existing institutional capacity which serves the poorer communities in our country.”**

“We have to ignore the rules we were taught in our training. I have to rush time – I must stop washing and serve tea. If there are no ward attendants, I must make tea myself. There's no point in washing the patient and giving medications, but failing to feed him. You cannot leave the patient with an empty stomach. Again, how can you leave a sick person in a wet bed and go for lunch?”

This pressure makes it even more difficult to recruit staff. New staff

are so shocked by their working conditions that they very quickly resign.

## Managerial capacity

But even more important than the shortage of staff is the lack of managerial capacity. In part this is caused by a shortage of managers, in part by poor management structures and in part by the concept of management that has developed in the public service. Thus management functions are regarded as the administration of rules and personnel, rather than the management of operations and people. Poor management structures means that there is no clear line of accountability for decision making. Problems are shuttled from one manager to

another, with no one taking responsibility. On top of this, there is a plain and simple shortage of managerial posts.

The result of all of this is a kind of managerial vacuum, where no one believes change is possible. All workers experience an enormous frustration in this situation. They are crying out for managers to take responsibility. A chief professional nurse explained: “When we meet with management we complain about the shortage of

staff, the linen, cleaners – they tell us to try your best! It's a joke! They come with no solutions. Who do we cry to?"

Workers are also crying out for supervisors to exercise their disciplinary powers, something that might surprise Minister Manuel. According to a nurse: "There are no disciplinary measures from top to bottom. If a nurse steals the clothes of a patient there will be no disciplinary action, they will give us a lecture on how to conduct ourselves. But the culprit is known." The majority of workers are committed and honest, but they feel that the institution does not value these qualities because it fails to discipline those who are corrupt or do not work.

### Management is unable to address problems of supervision, morale, labour relations conflict or training.

Everyone in the hospital agrees that cleaning is one of the biggest problems. Like Minister Manuel, managers and nurses blame the cleaners for being lazy. It is well-known that many cleaners can never be found at their work stations, but are either sitting under a tree or doing business outside the hospital. The cleaners themselves agree that there are lazy workers in their ranks, but blame the shortage of staff and the supervisors for failing to implement discipline.

But when we spoke to the supervisors they provided us with a very clear analysis of the problem. Although they are treated as supervisors and are expected to supervise the cleaners, they are not formally recognised as supervisors. Their job grades and pay are the same as ordinary cleaners. Until they are recognised, they said, they will not take the task of supervision seriously. Managers, on other hand, think they have dealt with the problem when they state that a supervisor grade

does not exist and send out a memorandum explaining this. The result is that the hospital stays dirty.

#### Paralysis

It is clear that many of the hospital's problems arise from its inability to manage people. This is not surprising, because the institution lacks an Human Resources (HR) Department. It has something called an HR Department, but in reality this is simply a personnel administration department dealing with issues such as pay roll queries, pensions, leave etc. It has no effective labour relations capacity, nor does it have any HR development, skills planning or training capacity. Apart from anything

else, the lack of HR capacity means there is neither a skills development plan, nor an employment equity plan. Line managers themselves lack any HR support and simply refer problems to the so-called HR Department.

The result is that management is unable in any way to address problems of supervision, morale, labour relations conflict or training. This is a major legacy of the apartheid approach to managing people. One recalls that 30 years ago, most private sector companies in South Africa were managed in exactly the same way. The difference is that when militant black unions emerged in the private sector, management responded by investing in sophisticated industrial relations and human resources departments. The public service, at least in this particular hospital, has not yet made the transition from deep apartheid. Until it does, there will not be a motivated, skilled and caring

public service in South Africa.

The apartheid system of authoritarian supervision at the hospital was destroyed under the hammer blows of militant trade unionism. In any case, such a system of discipline lacks any credibility in the new South Africa. Yet management, lacking an HR Department, does not have the capacity to establish a new mutually acceptable system of discipline in co-operation with the unions. This is not something that workers can establish on their own.

#### Future prospects

At least in this hospital, the public service unions (NEHAWU, DENOSA, HOSPERSA and NUPSW) and NALEDI are working together with management to solve some of these problems. Workers are extremely enthusiastic at the prospect of working for an institution they feel proud of. Provincial and national government are also showing interest and support. We hope that we can achieve significant success in this pilot project and we hope that the stakeholders will learn from it and begin to replicate it in other institutions. However, this will only be possible if government is prepared to grasp the nettle of investing in managerial and human capacity – for example, establishing a proper HR Department – in the institutions it is responsible for. That would be more productive than insulting public service workers for problems created by the public service managers.

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